## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10-760,615

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			14		·			RATE	FEE	1	RATE	FEE ·
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			14 minus 20=		* <i>v</i>			XS 9=	0	OR	X\$18=	
INDEPENDENT CLAIMS			<b>3</b> minus 3 =		J			X43=	0	OR	X86=	·
MULTIPLE DEPENDENT CLAIM PRESENT					-			·+145=	0	OR	÷290=	
* If the difference in column 1 is less than zero, enter "0" in co						olumn 2		TOTAL	385	OR	TOTAL	
CLAIMS AS AMENDED - PART II  Q-Q0-07 (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL I	
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total ·	- 10	Minus	- á	20	=		XS 9=		OR	XS18=	
	Independent	- 2 NTATION OF MU	Minus	C	<u></u> _	=		X43=		OR	X86=	
	FIRST PRESE	MIATION OF MI	JETIFLE DE	ENDENT	CLANV	<del></del>	۱ ،	+145=		OR	+290=	
								TOTAL ADDIT. FEE	1	OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENOMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE:	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	400				X\$ 9=		ОR	X\$18=	
	inaependent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF ML	LTIPLE DEF	ENDENT	CLAIM		1	+145=		OR	+290=	
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	•
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total -	•	Minus	**		=		X\$ 9=		OR	X\$18=	· ·
	Independent	•	Minus	***		= ·		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									٠ ا		
	* If the course column 1 is less than the color is column 2 write "0" in column 3									OR	+290=	
11	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ODIT. FEE	
		nber Previously Pa ber Previously Paid						ODIT. FEE <b>L</b> d in the app	ropriate box			
	070 077 /04 10	<del></del>					D-1-			. 050	BTMENT OF	COMMEDEE